PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09)765,631

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			24					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			Basic Fee	355.00	ОЯ	Basic Fee	710.00
TOTAL CHARGEABLE CLAIMS			24 minus 20=		• 4			X\$ 8=		OA	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 -					X40-		OR	X80=	
MUI	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
If the difference in column 1 is less than zero, enter 10° in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	MIITY	OR	OTHER SMALL	
	eran eta ye isemi iliki	(Column 1)	PERSONAL AND AN	(Con		(Column 3)	1	01111111		1		
MA		REMAINING AFTER . AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 25	Minus	- 2	4	· /		X\$ 9=	·	OR	X\$18=	18
ğ	Independent	• 4	Minus	*** (3	<u> </u>		X40=		OR	Xee≧	86
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							١.	+135=		OR	+270=	
			,					TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	104
fa.	-8 US	ABUII. FEE	•		/	,						
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENOMENT		HIGH NUA PREVI	REST REST REER ROUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 83	Minus	•• 6	25	-/		X\$ 9=		OR	X\$18=	
AME	Independent	· 4	Minus	enden	T CO AINA	<u>*</u>	-	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
BEST AVAILABLE COPY								TOYAL ADDIT, FEE		OR	YOTAL ADOIT, FEE	
10-6-05 (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMARKING AFTER AMERIDMENT		NUI PREV	REST IBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	2	5	ė		X\$ 9=		OR	X\$18=	
	Independent	• 4	Minus	····	+	-	4	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135= .		OR	+270=	
"If this entry in column 1 is less than the entry in column 2, write "I" in column 3. "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												